

Department of Medical Assistance Services 600 East Broad Street, Suite 1300 Richmond, Virginia 23219 www.dmas.virginia.gov

## **Plan First**

## Virginia's Family Planning Services Program For Men and Women

The following information is given as a guideline only. In order for Medicaid eligibility to be determined, an application must be filed with the local department of social services for the area in which you live.	
What is Plan First?	A program that pays for family planning services for those men and women who are eligible.
Who is Eligible?	<ul> <li>To be eligible, you must:</li> <li>Have income less than or equal to 133% of the federal poverty level for your family unit size (resources are not considered);</li> <li>Be a resident of Virginia; and</li> <li>Be a citizen or an alien eligible for Medicaid coverage.</li> <li>Individuals who have had a sterilization procedure, have medical insurance coverage or are eligible for full Medicaid benefits are not eligible to participate.</li> </ul>
How Do I Enroll?	<ul> <li>Plan First application is required.</li> <li>Applications are available on the web at www.dmas.virginia.gov , local Department of Social Services (DSS) and local health clinics.</li> <li>Completed applications need to be submitted to the local DSS agency. Mail-in applications are accepted; it is not necessary to have a face-to-face interview.</li> <li>A redetermination of your eligibility must be completed 12 months after the date of your enrollment to Plan First. If you remain eligible, you will receive additional 12 months of Plan First coverage.</li> <li>If you have questions or need assistance with completing your Medicaid application, contact an eligibility worker at your local department of social services.</li> </ul>
What Services are Covered through Plan First?	<ul> <li>Annual physical exams for men/annual gynecological exams for women;</li> <li>Cervical cancer screening for women;</li> <li>Sexually transmitted infection (STI) testing;</li> <li>Laboratory services for family planning and STI testing;</li> <li>Family planning education and counseling;</li> <li>Sexually transmitted infection and counseling;</li> <li>Sterilization procedures*;</li> <li>Food and Drug Administration (FDA) approved prescription contraceptives;</li> <li>FDA approved over-the-counter contraceptives; and</li> <li>Referrals to a primary care provider, local health department, community or rural health clinic that provides care for free or on a sliding fee scale for services not covered through Plan First.</li> <li>*Sterilization Consent Form for sterilization procedures must be signed at least 30 days prior to the surgery being performed.</li> </ul>
What Does Plan First not cover?	<ul> <li>Performance of, counseling for, or recommendations of abortions;</li> <li>Infertility treatments;</li> <li>Performance of a hysterectomy;</li> <li>Follow up services to a family planning visit;</li> <li>Repeat PAP screens due to abnormal results;</li> <li>Transportation to a family planning service; and</li> <li>Primary care services.</li> </ul>
Primary Care Referrals	To obtain a list of primary care providers in your area who may provide treatment for medical conditions at a reduced rate or on a sliding-fee scale, please call the Virginia Information and Referral line at "2-1-1".